

Rural Health Transformation Program: Project Summary



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1.0 Rural Health Transformation Program Overview

The Rural Health Transformation Program (RHTP) is a landmark \$50 billion federal investment designed to reshape healthcare in rural communities across America¹.

For years, rural communities in Missouri have faced unique healthcare challenges, including hospital closures, shortages of doctors and nurses, and overall poor health outcomes compared to urban areas.¹ These challenges are not abstract: 12 rural hospitals have closed since 2014, and today, 54.4% of our rural hospitals operate at a loss. Our communities face stark provider shortages, with 17.7 OBGYNs per 100,000 people in non-rural areas compared to just 3.3 in rural areas. The RHTP was created to address these long-standing issues head-on. The program represents a fundamental shift in federal policy. Instead of providing temporary funds to patch financial holes, it aims to support states in making systemic, long-term changes.

The Missouri Department of Social Services (DSS), through its MO HealthNet Division, led the state's application effort in close collaboration with the Department of Health and Senior Services (DHSS) and the Department of Mental Health (DMH).² This plan was not built in isolation; it was co-designed with a statewide Rural Health Workgroup. A 34-day public comment period, which received 228 written comments, also helped shape this proposal.

2.0 Missouri's Transformation of Rural Community Health Care (ToRCH Care)

The RHTP offers Missouri an unprecedented opportunity to confront the longstanding challenges in rural health. This \$1 Billion, five-year investment will pursue a **bold and comprehensive vision** –

Ensure every rural Missourian has access to the high-quality care they need through a delivery system that is well aligned, community anchored, and built to last.

Our objectives:

- **Expanding access to care:** Ensure rural Missourians can access primary and behavioral health providers close to home, community-based maternity options, with connections to specialists and complex care enabled by telehealth and provider interoperability

¹ Notice of Funding Opportunity Webinar, accessed October 15, 2025, <https://www.cms.gov/files/document/rht-program-applicants-webinar-presentation.pdf>

² CMS Releases State Guidance On Rural Health Transformation Program, accessed October 13, 2025, <https://www.mohospitals.org/newsroom/cms-releases-state-guidance-on-rural-health-transformation-program/>

- **Improving health outcomes:** Strengthen healthcare quality through integrated care coordination, aligned incentives, and evidence-based practices – so that rural Missourians consistently experience seamless, high-value care
- **Strengthening provider sustainability:** Reinforce the long-term sustainability of rural providers through targeted investments in infrastructure, adoption of innovative technologies, and payment models that reflect the realities of rural care delivery

To bring the vision to life, Missouri is transforming how rural healthcare works through the **Transformation of Rural Community Health Care (ToRCH Care)** – a statewide network of healthcare “hubs” that:

- Creates **30 Local Community Hubs** and **7 Regional Coordinating Networks**
- Operates at **three interconnected levels** of state, regional, and local (*see below*) to ensure consistent standards and shared infrastructure while empowering communities to design solutions tailored to their needs
- Builds on our successful **Transformation of Rural Community Health (ToRCH) pilot** that has proven potential for locally governed, data-driven collaboration

Over time, ToRCH Care will redefine how rural Missourians experience care by:

- **Bringing care closer to rural residents.** The Hub is essentially a convening and the ongoing collaboration of providers and local partners.
- **Integrating clinical and non-clinical services**, making care seamless for patients
- **Enabling partners to share** data, technology and infrastructure
- **Empowering local communities** to design locally tailored solutions while having statewide consistency and supports
- **Creating long-term sustainability** by reinvesting shared savings into programs that improve rural health outcomes

Three Interconnected Levels of ToRCH Care



3.0 ToRCH Care Initiatives

ToRCH Care will be created and sustained through five key initiatives:

1. Regional Coordinating Networks and Hub Activation

Building the foundation of Regional Coordinating Networks and Local Community Hubs to coordinate local care delivery and expand entry points for physical, behavioral, and social services

2. Alternative Payment Models

Designing and launching alternative payment models to sustain ToRCH Care through rewarding collaboration and high quality and high value outcomes

4. Rural Health Workforce Programs

Creating a talent pipeline that encompasses the cultivation, recruitment, training, and retention of rural clinicians and a broad array of healthcare professionals



3. Digital Backbone

Establishing the foundational layers of technology that enable ToRCH Care to function, including platform interoperability and data modernization

5. Provider Transformation

Investing in operational innovations that modernize and increase the sustainability of rural providers while preserving access with strategic renovations

3.1 Regional Coordinating Networks and Hub Activation

To build the central foundation of ToRCH Care, Missouri will establish a network of thirty Hubs linked through seven RCNs and overseen by the statewide RHTO. Each Hub will bring together provider partners³ to enable coordinated and improved care across providers, with the ability to track outcomes and impact, ensuring that every rural Missourian can access proper care without barriers.

Initiative components:

Core teams: *Dedicated staff, experts, and partners committed to improving local health outcomes in their rural communities*

ToRCH Care will deploy core teams across RCNs and Hubs to ensure consistent operations, aligned data, and coordinated care delivery statewide. Each RCN will provide analytic and administrative support to its Hubs, while local Hub teams will convene partners, manage referrals, and use community health data to drive priorities, funding, and help develop shared provider incentives that advance whole-person care.

Access expansion: *Building the frontline of population health and remote care*

RCNs and Hubs will expand Missouri's population health infrastructure by supporting local and virtual access points that connect residents to comprehensive primary, behavioral, specialty, and social services. Each Hub will help providers and citizens employ telehealth, community paramedicine, and specialty consultation programs to close service gaps, reduce avoidable hospital use, and deliver timely, coordinated care supported by a unified referral and data system.

Localized Programs: *Tailoring interventions to every rural Missouri community*

Providers and partners within each Hub will receive flexible sub-award funding to launch, expand, and/or enhance programs that directly address the needs of their specific community, such as perinatal home visiting, school-based health initiatives, nutrition-focused programming, non-emergency transportation needs, and wrap-around support for dually eligible Missourians. These projects will foster sustainable rural partnerships that extend care beyond clinic walls and into the homes and daily lives of residents.

³ Comprised of hospitals, FQHCs, behavioral health agencies, pharmacies, EMS, LPHAs, and community-based organizations

3.2 Alternative Payment Models

This initiative is the key to our long-term plan. To ensure ToRCH Care continues long after the five-year federal grant ends, Missouri DSS and collaborating State partners will support the development and adoption of an alternative payment model (APM) framework among the State's rural providers. The payment model will be designed to transform provider payment incentives, shifting from paying for the *volume* of services to paying for the *value* and *outcomes* of that care. This creates a sustainable funding source, rewarding participating providers within local hubs that improve patient care and reduce the cost of providing that care.

Initiative components:

Incentive Model Design: ToRCH Care will support the transition to payment models that reward health outcomes rather than patient volume. The model will initially be upside-only (i.e., providers can only benefit) to encourage participation and allow time for learning and refinement of payment model design as rural Missouri moves toward value-based care.

Payer/provider engagement and performance pools: The model will be developed through meaningful engagement and collaboration with payers and rural providers of all types. The State intends to solicit feedback on major model design components, including metrics for approximating care quality, the cost of care, expected improvement outcomes, and performance payment structures. Metrics will be selected and adjusted to enable rural providers and providers with small populations to engage with confidence.

Technical Assistance (TA): DSS will establish technical assistance programs to provide guidance and hands-on support to payers and rural providers. TA teams will help providers: engage with payers, improve coding and documentation, analyze clinical quality data, implement quality improvement initiatives, and adopt technology upgrades as needed.

Technology Enablement: Financial incentives will be available to support the initial technological investments needed by providers to meet State standards on quality, performance, and reporting.

3.3 Digital Backbone

The Digital Backbone initiative is Missouri's cornerstone effort to modernize rural healthcare through data connectivity and interoperability. It builds the technological foundation for coordinated data-driven care across all 104 rural counties under the Rural Health Transformation Program (RHTP).

Missouri's rural providers currently operate on fragmented systems that hinder information sharing. The Digital Backbone addresses this by creating a Rural Health Data Collaborative — a unified network linking hospitals, clinics, behavioral health centers, pharmacies, and public health agencies through HL7 FHIR and U.S. Core Data Interoperability standards. This integration will support more seamless and personalized patient care, increase provider efficiency, and strengthen the state's infrastructure for value-based care and rural access.

What this means for rural providers and patients in Missouri: This investment in technology is designed to give providers more time with their patients. By connecting systems, we reduce documentation burden, which is a major cause of burnout. It ensures your local clinic, your pharmacy, and your specialist can all see your records instantly and securely, creating a seamless, personalized, and coordinated care experience.

Initiative components:

Statewide digital readiness assessment: This initiative will conduct a comprehensive assessment to evaluate rural provider's readiness.

EHR upgrades: The initiative will provide funding, technical assistance, and shared FHIR-enabled platforms to modernize systems and improve interoperability.

Social care referrals and remote patient monitoring: This initiative will support integrating social care referrals and remote patient monitoring into clinical workflows to support real-time insights, reduce provider burden, and strengthen care coordination.

Data and AI governance: The Digital Backbone will establish data and AI governance to ensure privacy, cybersecurity, and responsible AI use.

Training and change management: The program will provide training, workflow redesign, and governance support to help rural providers implement and sustain new systems and capabilities.

3.4 Rural Health Workforce Programs

The Rural Health Workforce Program will establish a coordinated system that links recruitment, education, training, employment, and retention to strengthen the rural healthcare pipeline. The initiative targets the most urgent training gaps and workforce needs to sustain rural healthcare across Missouri.

Initiative components:

Early Healthcare Workforce Pathways: ToRCH Care will support the expansion of healthcare-focused career programs (CTE) in rural schools and post-secondary sites, creating clear routes from classroom to career. Working with local partners, Missouri will launch new CTE sites and support dual-enrollment courses that let students earn credits and certifications before graduation.

Maternal Health Workforce Expansion: ToRCH Care will support the expansion of maternal care by launching the state's first Certified Nurse-Midwife program, funding rural doula training, and strengthening perinatal home visitor programs to improve care, coordination, and outcomes statewide.

Medical School Clerkship Expansion: ToRCH Care will support partnerships between Missouri's medical schools and rural hospitals and clinics to establish and sustain clinical clerkship programs, expanding access to local training opportunities and increasing the pipeline of physicians serving rural communities.

Coordinated Investment in EMS: The program will also help build a stronger, more unified EMS system by expanding workforce capacity, strengthening training infrastructure, and incentivizing regional collaboration.

Workforce Retention and Enablers: Lastly, the initiative will fund practical, sustainable enablers for healthcare workers, such as childcare and local housing options, that will make rural practice more accessible and rewarding.

3.5 Provider Transformation

ToRCH Care will make investments to strengthen the physical, technological, and operational backbone of rural healthcare through two complementary pathways. The first focuses on operational innovation, equipping rural providers with modern tools and systems to improve care quality, coordination, and efficiency. The second focuses on strategic facility modernization.

Initiative components:

Operational innovation: These investments will equip eligible providers with remote patient monitoring (RPM), ambient AI capabilities and other related technologies, enabling them to deliver more effective care.

Strategic Renovation: This initiative provides direct investment in local healthcare facilities, tailored to their specific needs, helping rural providers stabilize essential services and patient safety while building toward sustainable growth over three horizons:

- **Horizon 1: Saving At-Risk Facilities.** These investments will target key rural hospital facilities in Missouri, addressing immediate safety and infrastructure risks to protect access to care and prevent closures.
- **Horizon 2: Re-establishing Local Services.** This will fund renovations of facilities to meet critical local needs. The goal of this Horizon is to meet the needs of local rural populations and ensure services are delivered safely and sustainably.
- **Horizon 3: Innovating for the Future.** This will fund transformative projects to drive innovation and new capabilities, like creating regional telehealth centers or ED diversion and hospital boarding alternatives, to expand how providers serve their communities.